

JUL 13 2001

## Summary of Safety and Effectiveness Hoffmann® II Hybrid Ring Clamp

### Submission Information

Name and Address of the Sponsor of the 510(k) Submission	Howmedica Osteonics Corp 59 Route 17 Allendale, NJ 07401-1677
Contact Person:	Karen Ariemma Regulatory Affairs Specialist
Date of Summary Preparation:	June 20, 2001

### Device Identification

Proprietary Name:	Hoffmann® II Hybrid Ring Clamp
Common Name:	External Fixation Frame Component
Classification Name and Reference:	Single/multiple component metallic bone fixation appliances and accessories, 21 CFR §888.3030

### Predicate Device Identification

The Hoffmann® II Hybrid Ring Clamp was determined substantially equivalent via 510(k) K000197.

### Device Description

The Hoffmann® II Hybrid Clamp is being modified to address issues in manufacturing.

### Intended Use:

This subject component, when used together with the components of the Hoffmann® II and/or Monotube® TRIAX™ External Fixation Systems and Apex® Pins, creates an external fixation frame construct. The subject device is intended to be used in the construction of external fixation frames to provide stabilization of open and/or unstable fractures and where soft tissue injury precludes the use of other fracture treatments such as IM rodding or casting.

### Statement of Technological Comparison:

Analysis demonstrates comparable properties of the subject to the predicate device.



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

JUL 13 2001

Ms. Karen Ariemma  
Regulatory Affairs Specialist  
Howmedica Osteonics Corporation  
59 Route 17  
Allendale, New Jersey 07401

Re: K011948  
Trade/Device Name: Hoffmann® II Hybrid Ring Clamp  
Regulation Number: 888.3030  
Regulatory Class: II  
Product Code: LXT  
Dated: June 20, 2001  
Received: June 21, 2001

Dear Ariemma:

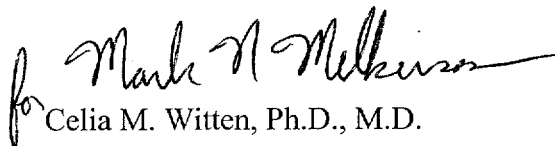
We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the Current Good Manufacturing Practice requirements, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic QS inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4659. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "<http://www.fda.gov/cdrh/dsma/dsmamain.html>".

Sincerely yours,

  
for Celia M. Witten, Ph.D., M.D.

Director  
Division of General, Restorative  
and Neurological Devices  
Office of Device Evaluation  
Center for Devices and  
Radiological Health

Enclosure

510(k) Number (if known): K011948

Device Name: Hoffmann® II Hybrid Frame System

Indications For Use:

The Hoffmann® II Hybrid External Fixation System is intended to be used in conjunction with the Apex™ Half Pins of the Hoffmann® External Fixation System and Kirschner Wires of the Monticelli Spinelli™ External Fixation System, and may be used as a Hybrid External Fixation System with the components of the Hoffmann® II External Fixation System and the Monotube® TRIAX™ External Fixation System.

This device is used to provide stabilization of open and/or unstable fractures and where soft tissue injury may preclude the use of other fracture treatments such as IM rods, casts, or other means of internal fixation. The indications for use of metallic external fixation devices include:

- Bone fracture fixation
- Osteotomy
- Arthrodesis
- Correction of deformity
- Revision procedure where other treatments or devices have been unsuccessful
- Bone reconstruction procedures

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

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Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use \_\_\_\_\_

OR

Over-The-Counter Use \_\_\_\_\_

(Per 21 CFR 801.109)

for Mark N. Milherson (Optional Format 1-2-96)  
(Division Sign-Off)  
Division of General, Restorative  
and Neurological Devices

510(k) Number \_\_\_\_\_

K 011948